

Public preferences for wording of dosage instructions on dispensed medicine labels

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Background: There is a legislation in England outlining the requirements for labels to be applied to dispensed medicines, which include directions for use. The NPSA guide recommends dispensing labels should be no smaller than 35 × 70 mm to allow for adequate font size and states that the direction is the most important information on the dispensing label but gives no specific guidance on the syntax, style, and content of directions.^[1] Royal Pharmaceutical Society recommends the use of active verbs and capitals to emphasise the quantity and frequency of dosing (e.g. Take ONE tablet TWICE a day).^[2] No work in England has explored the views of the people who need to interpret dispensing labels on their preferences, especially those of ethnic minorities or for whom English is not their first language.

Aim: This study set out to explore the preferences of members of the public for wording of instructions on dispensing labels.

Methods: A focus group was convened of members of the public recruited through posters and leaflets to determine views of standard dispensing labels and alternatives, plus issues that should be considered. The findings were used to develop a short questionnaire that was used to obtain the views of a sample of the general public recruited through street surveys and health-related websites, aiming to reach a wide range of ethnicities. Mock dispensing labels were provided allowing easy selection of preferences through an on-line survey. University ethics approval was obtained. Data were analysed in SPSS.

Results: The focus group suggested that preferences for quantity, frequency, timing, indication, and use of “as directed” be studied. The questionnaire designed to investigate these issues also included educational level and language preferences and was administered to 523 individuals. The population comprised a majority of females (64%), with a high proportion being Asian (63%), or other (13%), and 245 white. There were 55% university educated, 34% college, and 12% school-educated respondents. 196 (41%) used regular medicines; 32% did not have English as a first language, but only 36 individuals indicated they needed dispensing labels in another language, mostly Gujarati. There were clear preferences for the use of words rather than figures for quantity, but general times of day (such as morning and evening) were preferred by more respondents (76%-81%) compared with generic wording, such as twice a day or daily (19%-24%). A third preferred specific time, such as 6 PM, compared with two-thirds preferring general times of day. A small majority (53% of 477 responding) did not like the use of “as directed,” only 21% did, and 26% did not mind. Of 477 giving views on adding the indication, 53% were in favour, 19% were against, and 28% did not mind. The proportion of those in favour was lower amongst respondents using regular medicines (42%) compared with those not (60%) ($p=0.001$; Chi-squared).

Conclusion: Guidance should consider preferences for wording of dispensing labels. Labels may benefit from using general times of day, and labels in other languages should be considered. Preferences for indication vary and should be taken into account.

REFERENCES

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